SÜBMIT: <u>©OMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

JUN 012012

Date: Permit #: Refund: Amount Paid: 150:07 13.090 10.090 215

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. The NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

APPLICANT, VIOLE CO. LOWING IN AUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

Car 201	2472	Date 24	mpany this application	ation must accor	r letter(s) of authoriz	for the Deed All Owners must sign or letter(s) of authorization must accompany this application)	essonable time for the personable time for the persona	ertyat any, reass	above described property at any reasonable time above described property at any reasonable time owner(s): Owner(s): (If there are Multiple Owners listed on	
owledge that I (we) cept liability which have access to the	ete. I (we) ackn I (we) further ac y ordinances to	NALTIES use, complete. I (we) acknowledge that I (we) use, correct and complete. I (we) further accept liability which he to issue a permit. I (we) further accept liability which hadministering county ordinances to have access to the	MIT WILL RESULT IN PEI nowledge and belief it is tru unty in determining wheth unty officials charged with	WITHOUT A PERI best of my (our) kr worn by Bayfield Col	RTING CONSTRUCTION mined by me (us) and to th gand that it will be relied to the construction of the const	FAILURE TO OBTAIN A PERMIT O' STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES by accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct by accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct by of all information I (we) am (arg) providing and that it will be relied yentra garded county in determining whether to issue you did not a support of the control of the county of itself is the control of the county of itself is the	FAILURE luding any accompa	s application (inc for the detail an	F I (we) declare that this application (including any am (are) responsible for the detail and accuracy (
A SAVA				100	The state of the s	Other: (explain)	Other: (explain)			organization
		~ ~				Special Use: (explain)	4			4269,4363,450
					Alteration (specify	Accessory Building Addition/Alteration (specify)			-	
1728	7	× +ZC		35	Greenhouse	Accessory Building (specify)	\sqcup	Γ	☐ Municipal Use	
		(x	144 144 144 144 144 144 144 144 144 144			Addition/Alteration (specify)	+			
			cooking & food prep facilities,	or □ cooking	leeping quarters,	Bunkhouse w/ (sanitary, or land the	 			
				-		with Attached Garage		Use	ommercial Use ک	
	_		111			with (2 nd) Deck				
- Light		x :			, and the second second	with (2") Porch	***************************************		•	Alexandra
	_ -	×××			Patry 4	with a Porch		Jse	Residential Use	
	-	, (The state of the s	with Loft	I COLUCTIVA		es ka	
)	×			hack, etc.)	Principal Structure (first structure on property) Posidence (i.e. cabin, hunting shack, etc.)	1-			
Footage	sions)	Dimensions		Ċ	Proposed Structure				Proposed Use	
Square								ction:	Proposed Construction:	· ·
	Height:		Width:		Length: 2	or is relevant to it)	peing applied fo	: (if permit	Existing Structure: (If permit being applied for is relevant to it)	
		11111	Notie		and the second s			X		
	3	let	□ Compost Toile			☐ Foundation		Property		
		[₹	☐ Portable (w/s	None			Run-a Business on	Relocate (existing	•	
	Vaulted (min 200 gallon)	r J Vaulted (Privy (Pit) or	- L		□ 2-Story	ion	☐ Conversion	2000	
		sts) Specify Type:	Canitary (Exists) Specify Type:	2	☐ Year Round	4	Addition/Alteration	☐ Addition	л	
□ City		. _	1		<i>V</i>	1-Story	New Construction	□ New Co	Hactiai	100
Water	iem P	What Type of er/Sanitary System on the property?	W Sewer/ Is on	# of bedrooms	Use	# of Stories and/or basement	Project (What are you applying for)	Pro (What are yo	Value at Time of Completion * include donated time &	
								od Process Constitution of the Constitution of	Non-Shoreland	1 1200
. × No	No	7	fee	Distance Structure	If yescontinue	☐ Is Property/Land within 1000 feet of Lake, Pond or Howage If yescontinue	ty/Land within	☐ Is Propet	- Siloicialia	No. and Gibbs Store
Present? ☐ Yes	Floodplain Zone? □ Yes				continue	Creek or Landward side of Floodplain? If yescontinue	indward side o	Creek or La		
	operty in		ture is from Shorelin	Distance Structure		300 feet of River, Stream	tv/I and within	Te Droner		. .
6.2	Acreage	Lot Size	-	Z.	Townof:	N, Range 08 W	2	Township	Section 16	
		Subdivision:	Block(s) No. S	Lot(s) No.	Page	Lot Lot(s) CSM	Gov't Lot	14	1.57.38 35.38	Z.
(s)	Page(s)	Volume	10000	8-1F-4	-185%	(Use Tax Statement) PIN: (23 digits		Legal Description	PROJECT LOCATION	
Attached Yes No	Attached O Yes	ate/zip); written Authorization Attached Percented Document: (i.e. Property Ownership)	Agent Mailing Address (include City/State	ent Mailing Add		of Owner(s)) Agent Phone:	lication on behalf	son Signing App	Authorized Agent: (Person Signing Application on behalf of Owner(s))	
Phone:	Plumber Phone:	,		Plumber:	one:	Contract			Contractor:	
				SAN S	Z Zip.	CINState/Zip	20	7	Coloress of Property:	
774-2831	Cell Phone:	する。	traper.		- Jan. 1	Name of the second	でなる	ST.	Owner's Name:	. 0
OTHER).A. 🗆 OTI Telephone:	LUSE B.O.A.	ONAL USE SPECIAL	☐ CONDITIONAL USE		□ SANI	LAND USE	(UESTED-	TYPE OF PERMIT REQUESTED—	<u> </u>

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

THE LIC NOT

Rac'd for Issuance Address to send permit

Authorized Agent:

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

2012

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